Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date;	<u>06/11/2010</u>	Address:	104 <u>0 Main St</u>
Case #:	<u>51F17663</u>		Anderson IN
County:	<u>Mad</u> ison		
Type of Laboratory Scizure (check one) Se		Seizure Location (check all that apply)	
Operation Chemical Dumpsi	al/Glassware/Equipment (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☑ Other: <u>Anderson PD</u>
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): Office			
Red Phosphorous/Iodine Reaction(s);			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
☐ Hydrochloric Acid Gas Generator(s):			
Corrosive Acid:			
Corrosive Base:			
Other (item and location):			
☐ Yes No	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrine	EInformation E/Pseudoephedrine Tracking Log Erchant Tip EDTE
This report is to be faxed to the following agencies that serve the location:			
Fire Departi	ment: Anderson	Fax: <u>765-648-6600</u>	
Health Depa	artment: Madsion County	Fax: <u>765-6</u> Fax:	
Child Protec	ction Service:	· · · · · · · · · · · · · · · · · · ·	
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>Aaron Pfuff</u> Phone 317-234-4591			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing,

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.